

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101593,742

FILING DATE

9-22-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			2			
2						
3						
4						
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15						
16						
17						
18						
19						
20						
21						
22			2			
23			1			
24				1		
25				1		
26				1		
27				1		
28			1			
29			1			
30				1		
31				1		
32				1		
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34			1			
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48						
49						
50						
TOTAL IND.			4			
TOTAL DEP.			8			
TOTAL CLAIMS			12			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						